

## INDIANA DEPARTMENT OF HOMELAND SECURITY CODE SERVICES SECTION

302 West Washington Street, Room W246 Indianapolis, IN 49204-2739 http://www.in.gov/dhs/fire/ip\_bs\_comm\_code/



INSTRUCTION: Please refer to the attached four (4) page instructions. Variance number (Assigned by department) Attach additional pages as needed to complete this application, 16-06-09 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of the applicant Title John K. Dueser Owner / Operator Name of organization Telephone number John K. Dueser / DBA Johnny's Market (317)845-1941 Address (number and street, city, state, and ZIP code) 9607 Highgate Circle, Indianapolis, IN 46250 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant) Name of person on behalf of the applicant Timothy P. Simpson Name of organization Telephone number American Tent & Awning Co., Inc. (317)632-7226 Address (number and street, city, state, and ZIP code) 205 E. Palmer St., Indianapolis, IN 46225 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number Name of organization Telephone number Address (number and street, city, state, and ZIP code) 4. PROJECT IDENTIFICATION Name of project State project number County Johnny's Market Marion Site address (number and street, city, state, and ZIP code) 6379 N. College Ave., Indianapolis, IN 46220 Type of project: ☑ New Addition Alteration Change of occupancy 7 Existing 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount, (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire & Building Safety issued a Correction Order? Yes (if yes, attach a copy of the Correction Order) Has a violation been issued? Yes (if yes, attach a copy of the Violation and answer the following) ☑ No ☐ Local Building Department☐ Local Fire Department Violation issued by: State Fire and Building Code Enforcement Section

7. DESCRIPTION OF REQUESTED VARIANCE		
Name of code or standard and edition involved	Specific code section	
2014 Indiana Fire Code  Nature of non-compliance (include a description of spaces, equipment, e		tion 3103.5
Having a tent up for more than 30 days in the same location.	c. livolved as necessary)	
The variance is needed so that Johnny's Market has shelter to conduct business.		
His seasonal business runs from mid April to just before Christmas every year.		
B. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND WELFARE WILL BE PROTECTED		
Select one of the following statements:		
Non-compliance with the rule will not be adverse to the public health, safety or welfare; or		
Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (be specific).		
Facts demonstrating that the above selected statement is true:		
Johnny's Market has been operating on the premises for over 25 years. He provides farm-fresh products which, if anything, is good for the public health and welfare.		
We've had the very same setup for the last three years with no problems.		
The tent occupies the same footprint as the permanent structure he used to have.		
The tent itself was manufactured by Anchor Industries, Evansville IN., a leading manufacturer for over 150 years. Originally supplied with		
1" dia. 30" long stakes we will be using 42" long stakes. Additionally, the stakes are doubled up on the high stress corner areas. The tent has been certified to be flame retardant (copy attached) by Anchor Industries. The tent will be maintained regularly by American Tent &		
Awning Co. Inc		
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORIC	ALLY SIGNIFICANT STRUCTURE	
Select at least one of the following statements:		
Imposition of the rule would result in an undue hardship (unusual difficulty) because of physical limitations of the construction site or its utility services.		
Imposition of the rule would result in an undue hardship (unusual difficulty) because of major operational problems in the use of the building or structure.		
Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements.		
Imposition of the rule would prevent the preservation of an architecturally or a historically significant part of the building or structure.		
Facts demonstrating that the above selected statement is true:		
Johnny had a permanent pole barn type structure on the site that was destroyed by a runaway IPL bucket truck and had to be torn down		
the rest of the way. He had plans to build a similar structure but found out that the area was in a flood plane. No available pole barn plans would meet the code requirements for that situation, ultimately driving costs way up.		
In light of the current changes going on in the area, a permanent structure doesn't make sense anyway, Johnny is not cure health		
be able to commute boing business at this location. He would like to continue to offer the area's only folly farm fresh products for an long on		
possible. Therefore, we ask that this variance be for all future years		
10. STATEMENT OF ACCURACY		The second secon
hereby certify under penalty of perjury that the information contain	ned in this application is accurate.	
Signature of applicant or person submitting application Please print	name	Date of signature (month, day, year)
Timothy P.	Simoson	SICH
Signature of design professional (If applicable) Please print r		Date of signature (month, day, year)
		Same interest only Appl)
11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement)		
hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.		
enature of applicant Please print r		The state of the s
John K. De		Date of signature (month, day, year)
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